Mr. Purcell classifies the malignant tumours as follows: A. *Carcinoma;* including, 1, scirrhoid; 2, hæmatoid; 3, melanoid; 4, colloid; 5, myxomatoid. B. *Sarcoma;* including, 1, spindle-celled; 2, round-celled; 3, giant-celled; 4, mixed-celled; 5, small round-celled (glioma). C. *Lymphadenoma;* D. *Epithelioma;* E. *Psammoma.*

That which may be called the second portion of the book, beginning at page 98, describes the malignant tumours as they affect the different external and internal organs. In this part of the treatise the author shows an equal familiarity with the microscopical and clinical aspects of morbid growths; and has, therefore, produced a series of chapters which are exceedingly interesting, and of great practical value. If space permitted, long extracts could be made which would convince the reader of this masterly combination of pathological science and clinical medicine and surgery; which is the more appreciated because so unusual in the literature of the present decade. The first part of the book deals apparently with questions too philosophical for the tastes of the author, and is, therefore, written badly; but the second portion is evidently the work of a practical observer, who has had abundant microscopical and clinical experience.

The remarks on treatment cannot fail to furnish suggestions to those who refer to the treatise for information regarding cases met with in daily practice.

The wood-cuts are rather poor, and the style of diction sometimes obscure (see top of page 152); but in the second portion of the volume there is so much of value that the reader forgets his uninteresting plodding through the early chapters, which will, perhaps, be improved in subsequent editions.

J. B. R.

ART. XXXIX.—*Ministro d'Agricoltura, Industria e Commercio. Direzione di Statistica, Annali di Statistica,* Serie 2nd, vol. 6, 1881. *Geografia Nosologica Dell' Italia.* Studio del dottore GIUSEPPE SORMANI, Professor d'Igiene nella Regia Universita di Pavia.

Administration of Agriculture, Industry, and Commerce. Direction of Statistics, Statistical Annals, Nosological Geography of Italy, prepared by Dr. GIUSEPPE SORMANI, Professor of Hygiene in the Royal University of Pavia. 8vo. pp. 335. Rome, Eredi Botta, 1881.

DR. SORMANI having been very favourably impressed with the value and importance of the statistical atlas of the United States compiled from the census of 1870 by Francis A. Walker, conceived the idea of doing a similar work for his own country, and prepared from the census of Italy the volume under examination, for which he received from the Royal Lombardic Institute of Science and Letters a prize of 1500 lira, and a silver medal. The original paper was illustrated by an atlas of 80 plates; the volume here noticed contains seven. These all relate to the military service of the country, and exhibit at a glance, by the lightness or density of colour in the different provinces, the relative proportions of those disabled by reason of the following conditions or diseases. 1. Scald-head, most abundant in Southern Italy, maximum 30 or 40 to 1000. 2. Caries of the teeth, most abundant on the northern coast line, 8 to 13 per 1000.

3. Goitre and enlarged neck—Northern Italy, max. 100 to 320 to 1000. 4. Varices—Northern half of Italy, max. 30 to 41 to 1000. 5. Chronic diseases of the abdominal viscera, most abundant in the hotter districts, 30 to 50 to 1000. 6. Scrofula—Northern district, max. 0.8 to 11 per 1000. and, 7. Deficient height—Southern Italy and Northern frontier, max. 300 to 430 to 1000.[1]

We will pass over the military statistics, and take up some of those which have a more general interest. The average annual mortality of the city of Turin is computed at 26.93 per 1000; Milan, 32.66 per 1000; Venice, 31.70 per 1000; Bologna, 30.41; Genoa, 30.42; Leghorn, 27.17; Rome, 33.38; Naples, 33.23; Catania (Messina), 31.08.

The deaths from phthisis and tuberculosis per annum, ascertained by the average of a series of years, were for Turin 2.39 per thousand inhabitants; Milan, 3.69; Palermo, 2.64. The minimum record (1.42) is that of Catania; and second, of Genoa, 2.00; Bologna, Milan, and Venice vary but slightly, ranging from 3.69 to 3.84, the maximum. Compared with these, we find the mortality by phthisis alone, to be in Glasgow, 7.0 per thousand; Edinburgh, 4.9; Paris, 4.1; Berlin, 3.8; Dresden, 3.0; and London, 2.9 (which is the average of England and also of Algiers).

The deaths from phthisis alone, in the chief northern Italian cities, taking the average of a series of years, number as follows, viz., Venice, 3.88; Padua, 3.03; Milan, 3.53; Genoa, 2.55; Turin, 2.58; and Verona, 2.10 per thousand of inhabitants.

Goitre and *Cretinism*.—Although these two affections bear an intimate relationship to each other, they are frequently independent, the cretin being often non-goitrous. In the cretin census of Piedmont made in 1845, there were 3909 goitrous to 2089 non-goitrous cretins enumerated. According to Baillarger (1873) France contained 500,000 goitrous subjects, and 120,000 cretins and idiots. In Piedmont, Liguria, and Savoy there have been found 7084 cretins and 21,841 subjects of goitre; the cretins averaging 2.7 to 1000 inhabitants, and the goitrous subjects 8.3. The largest number of cretins is found in the vale of Aosta, *i. e.*, 1418 or 27.9 per thousand. Of 2,000,000 Italians liable for military service, 4121 were exempted for cretinism and idiocy, and 42,862 for goitre.

Alcoholism.—This cannot be ascertained by the number of deaths attributed to intemperance in mortuary reports, as the causes of death are generally attributed to some immediate condition, such as cerebral congestions, convulsions, etc., rather than the primary cause. Italians are not given to intemperance in anything like the proportion which prevails in Great Britain and America. The number of confirmed drunkards as given for the year 1875, by Dr. Ernesto Terzi, was 15,895, or 0.55 to each 1000 inhabitants; of these the northern parts of the kingdom contained more than one-half.

Apoplexy.—The proportion of deaths from this disease amounts to about 100 to 1,000,000, or 0.10 to 1000. There were in ten years 1868–'77; 26,753 deaths. In England the mean average is 1.35, in Ireland 1.36, in Berlin 1.60. In the Italian cities the range is much higher than the general average, viz., Mantua, 1.90; Rome, 1.75; Turin, 1.61; Milan, 1.47; Bologna, 1.36; Palermo, 0.94.

Hernia.—20.8 of all men in Italy, per thousand, as shown by the rejections for the army in a period of fourteen years, are affected with hernia, varying in different localities, from ½ to 3 per cent.

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[1] The military minimum stature in Italy is 5 ft. $1\frac{7}{16}$ in. The number rejected in all Italy was 282,993, or 121.3 to each thousand "inscribed."

Suicide.—The average for Italy per an. is 33.5 in a million. Compare this with Spain 17 (average for 4 years), there were 36 in 1880; Russia, 29; Holland, 35.5; Norway, 73; France, 150; and Denmark, 258.

Homicide.—In this the comparison is reversed, Italy 67.5 in 1,000,000; Austria, 33.8; Belgium, 16.5; Prussia, 19.5; and England and Wales, 16.6. Of suicides Austria presents 86.5; Belgium, 72.2; Prussia, 144.6, and England, 67.9, per million.

General Mortality.—Average per annum in ten years 793,914, or 29.6 per thousand. Compare with Ireland, 17.2; Norway, 17.3; Denmark, 19.6; Greece, 20.9; England and Wales, 22.0; Belgium, 23.2; France, 24.0; Holland, 24.9; Prussia, 27.2; Spain, 31.2; Russia, 36.7; Hungary, Croatia, 38.0; and Slavonia, 43.7.

To the hygienist, this work of Prof. Sormani is one of much value and interest. R. P. H.

ART. XL.—*Health Reports:* 1. *Fourth Annual Report of the Connecticut State Board of Health for the fiscal year, ending November* 30, 1881, *with the Registration Report of* 1880. Hartford, 1882. pp. 300, pp. 100.

2. *Second Annual Report of the State Board of Health of South Carolina for the fiscal year ending October* 31, 1881. Charleston, 1881. pp. 304.

THE report from *Connecticut* opens with a general summary of the progress made and work done in hygiene during the past year, both of which are pronounced very encouraging. The voluntary sanitary associations, which have sprung up in various parts of New England, in imitation of Dr. Storer's at Newport, are justly praised, and hailed as the evidence of an awakening of public opinion to the immense importance of systematic care of the health, which is highly gratifying. The Connecticut Board has had more applications from local boards of health for advice the past twelvemonth than during any previous year, and the zeal and activity displayed are mentioned as being quite remarkable. In regard to the prevalence of diseases in Connecticut, it is stated that the deaths from typhoid fever, and from diarrhœal diseases generally, have been more numerous, and that smallpox has been introduced into many of the cities and towns, but being for the most part carefully managed, according to the excellent "Instructions" (issued in pamphlet form by the State Board), in but few instances has there been any spread of the disease. The number of deaths from scarlet fever and from malarial affections has increased, but diphtheria has been rather less abundant and less fatal. A few cases of poisoning from aniline dyes, from cosmetics, and from arsenical wall papers are noted. A special investigation in regard to trichiniasis appears in the report, and others respecting the "Bad taste and odor of potable water," and one on "School Hygiene," are announced as being in preparation.

The body of the work contains, first, an interesting abstract of the